ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO COUNTY COURTHOUSE, 220 W. BROADWAY, SAN DIEGO, CA 92101-3814 NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92083-6695 EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-3941 SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910-5649		
PEOPLE OF THE STATE OF CALIFORNIA	PLAINTIFF	
vs		CDIMINAL CACE NUMBER
	DEFENDANT(S)	CRIMINAL CASE NUMBER
	. ,	DA/CA NUMBER
NOTICE OF PETITION AND PETITION FOR RELIEF PURSUANT TO PENAL CODE SECTION 1210.1(d)		COURT HEARING Date: Time: Dept.:
TO: DISTRICT ATTORNEY, COUNTY OF SAN DIEGO CITY ATTORNEY, CITY OF SAN DIEGO CHIEF PROBATION OFFICER, COUNTY OF SAN DIEGO		
PLEASE TAKE NOTICE that on the date, time and in the	department ir	ndicated above, or as soon thereafter as
petitioner may be heard, the petitioner will present the following petit	ion:	
PETITION		
Pursuant to Penal Code 1210.1(d) petitioner requests that t	he Court set a	aside the conviction herein, and order the
charge(s) dismissed.		
STATEMENT OF F	ACTS	
Petitioner was convicted onof the following charges:		
Probation was granted by the Court for a period of years.		
Petitioner is entitled to the relief requested by reason of the following:		
(1) Petitioner successfully completed drug treatment.		
(2) Petitioner has substantially complied with the conditions of probation.		
(3) There is reasonable cause to believe that Petitioner will not abuse controlled substances in the future.		
I certify under penalty of perjury under the laws of the State of Califo	rnia that the fo	oregoing is true and correct.
Date:		
Pe	titioner/Attorn	ey for Petitioner
Distribution by:onto: Deft. Atty. Pros. Pro	b. R&R	Other: